

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for MCPL

IMPORTANT: Indicate by # type of committee you are reporting for: 11

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

<b>FORM DR-2</b> (Rev. 07/2007)	<b>DISCLOSURE REPORT</b>
<b>For Office Use Only</b>	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Carol A. Evers  
SIGNATURE OF PERSON FILING REPORT

641-423-4950  
TELEPHONE

October 15, 2007  
DATE SIGNED

I AM FILING A October 19, 2007  
(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election <u>November 6, 2007</u>
County & Local Committees, enter County in which Election is held <u>Cerro Gordo County</u>

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 500.00

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

2860.40

Schedule F: Loans Received total (Attach Schedule F)

—

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

—

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 3360.40

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1951.54

Schedule F: Loan Repayments total (Attach Schedule F)

—

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 1408.86

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 100.00

**\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 1507.27

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ —

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO ☐

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ —

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for MCPL

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
09/08/07	ID# CK#	Bonnie McCoy 431 1st St. S.E. Mason City, Iowa 50401		\$ 250.00	<input type="checkbox"/>
09/12/07	ID# CK#	Sharon Lindgren 22 Asbury Place Mason City, Iowa 50401		50.00	<input type="checkbox"/>
09/14/07	ID# CK#	Darrell and Susan Fisher 1030 - 15th St. S.E. Mason City, Iowa 50401		500.00	<input type="checkbox"/>
09/15/07	ID# CK#	Dennis Reidel 842 11th Street N.E. Mason City, Iowa 50401		50.00	<input type="checkbox"/>
09/17/07	ID# CK#	Patrick E. McGarvey 2323 S. Jefferson Avenue Mason City, Iowa 50401		150.00	<input type="checkbox"/>
09/19/07	ID# CK#	Kay J. Sloan 1208 Eastmoor Dr Mason City, Iowa 50401		100.00	<input type="checkbox"/>
09/20/07	ID# CK#	Theresa M. Betz 3 Barberry Road Mason City, Iowa 50401		50.00	<input type="checkbox"/>
09/26/07	ID# CK#	Laura Cook 15358 Lambert Drive Clear Lake, Iowa 50428		150.00	<input type="checkbox"/>
09/26/07	ID# CK#	Major Erickson Funeral Home 111 N Pennsylvania Mason City, Iowa 50401		250.00	<input type="checkbox"/>
09/26/07	ID# CK#	Kathy Van Dike 6 College Circle Mason City, Iowa 50401		100.00	<input type="checkbox"/>
SUB-TOTAL				\$650.00	
TOTAL (If last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the

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Schedule A

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for MCPL

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09/26/07	ID# CK#	Mary Sue Kistingbury 12406 275th St. Mason City, Iowa 50401		\$ 25.00	<input type="checkbox"/>
09/27/07	ID# CK#	Charles Sweetman 361 South Pennsylvania Mason City, Iowa 50401		100.00	<input type="checkbox"/>
09/27/07	ID# CK#	Jo Brandt 4 Regency Lane S.E. Mason City, Iowa 50401		5.00	<input type="checkbox"/>
9/30/07	ID# CK#	Interest Credit (First Citizens National Bank) checking account		.40	<input type="checkbox"/>
10/03/07	ID# CK#	Mark Johnson 1245 Plymouth Road Mason City, Iowa 50401		100.00	<input type="checkbox"/>
10/05/07	ID# CK#	Pamela J. Lettow 1148 Onyx Court Mason City, Iowa 50401		25.00	<input type="checkbox"/>
10/05/07	ID# CK#	Adel Makar 1000 Briarstone Drive Mason City, Iowa 50401		200.00	<input type="checkbox"/>
10/05/07	ID# CK#	Nancy Barnes 161 Lakeview Drive Mason City, Iowa 50401		50.00	<input type="checkbox"/>
10/09/07	ID# CK#	Terry Carpenter 12 Sumac Drive Mason City, Iowa 50401		50.00	<input type="checkbox"/>
10/09/07	ID# CK#	James Fitzpatrick 11 Hackberry Road Mason City, Iowa 50401		100.00	<input type="checkbox"/>
SUB-TOTAL				\$2305.40	
TOTAL (If last page of this schedule)				\$	

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# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for MCPL

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/09/07	ID# CK#	Craig Schulting 421 South Louisiana Mason City, Iowa 50401		\$ 25.00	<input type="checkbox"/>
10/09/07	ID# CK#	Central Park Dentistry 23 North Federal Mason City, Iowa 50401		250.00	<input type="checkbox"/>
10/09/07	ID# CK#	Gamma Sigma Chapter of Beta Sigma Phi 215 Taylor Ave North Mason City, Iowa 50401		100.00	<input type="checkbox"/>
10/09/07	ID# CK#	Daniel J. Haase 829 North Carolina Avenue Mason City, Iowa 50401		20.00	<input type="checkbox"/>
10/11/07	ID# CK#	Joyce Hanes 15936 310th Street Mason City, Iowa 50401		50.00	<input type="checkbox"/>
10/12/07	ID# CK#	La Vaughn Lichty 5 South Willowgreen Ct Mason City, Iowa 50401		10.00	<input type="checkbox"/>
10/12/07	ID# CK#	Catherine Isaak 46 Circle Terrace Mason City, Iowa 50401		100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (If last page of this schedule)

\$  
\$2860.40

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the

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Schedule A

FOR INSTRUCTIONS, SEE BACK OF FORM

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## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE B</b> (Rev. 07/03)	<b>MONETARY EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

*Citizens for MCPL*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
09/19/07	ID# CK# 1000	Cerro Gordo County Treasurer 220 N. Washington Mason City, Iowa 50401	City of Mason City Map; Voting records-2003 to Present; 2006 General Election absentee voters; 2007 School Board	\$ 23.00
10/04/07	ID# CK# 1001	Mason City Post Master 211 North Delaware Ave Mason City, Iowa 50401	100 41¢ Stamps 100 2¢ Stamps	43.00
10/05/07	ID# CK# 1002	Kramer Ace Hardware 440 South Illinois Mason City, Iowa 50401	Rental of portable Electric Sign including Maint. 1/2 of fee (lowe tax)	50.00
10/05/07	ID# CK# 1003	DTI P.O. Box 107 Winona, MN 55987	Telephone installation and service 4 Business Lines	429.29
10/09/07	ID# CK# 1004	Kramer Ace Hardware 440 South Illinois Mason City, Iowa 50401	Tax owed on sign rental (Portable Elec. Sign)	3.50
10/11/07	ID# CK# 1005	Dimensional Graphics 325 N. Jackson Mason City, Iowa 50401	Brochures - tri-fold Printing Door Hangers	267.65
10/11/07	ID# CK# 1006	Melissa Jones 340 South W. Ktown Pike Mason City, IA 50401 Apt 13E	Data management Personnel 13.75 hrs x 7.50	103.12
10/12/07	ID# CK# 1007	PSI (Printing Services, Inc.) 1915-4th Street S.W. Mason City, Iowa 50401	Sortwick, Connection Fluid Envelopes	7.25
SUB-TOTAL				\$ 926.81
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

## EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

Citizens for MCPL

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/12/07	ID# CK# 1008	PSI (Printing Services Inc.) 1915 - 4th Street S.W. Mason City, Iowa 50401	Fold Over Yard Signs	\$ 779.57
10/12/07	ID# CK# 1009	PSI (Printing Services, Inc.) 1915 - 4th Street S.W. Mason City, Iowa 50401	Window Signs	111.41
10/12/07	ID# CK# 1010	2 Jay Square Company Videography 1513 Ninth St. S.W. Mason City, Iowa 50401	Presentation Recording VHS Copy; Digital Tape; DVD	133.75
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$
TOTAL (If last page of this schedule)				\$ 1951.54

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for MCPL

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE <b>D</b> (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD  
(DO NOT INCLUDE LOANS – SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10/ 10/1	PSI (Printing Services, Inc.) 1915 4th Street S.W. Mason City, Iowa 50401	Stick-on Badges ("Yes!" Library Nov. 6)	\$ 100.00 estimated
SUB-TOTAL			\$
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 100.00

\*If actual figure is unknown, show "estimated" beside the figure.

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(for Schedule D)

CANDIDATE COMMITTEES NOTE:

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for MEPL

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
09/09/07	Gary Horn 206 Lakeview Drive Mason City, Iowa 50401		4 White Boards for signs @10.00	\$ 40.00	<input type="checkbox"/>
09/14/07	Growth Properties LLC 206 North Main Street, Ste 1 Charles City, Iowa 50616		Office Space rent 8 weeks	1200.00	<input type="checkbox"/>
10/08/07	River City Communications 820 South Pennsylvania Ave Mason City, Iowa 50401		Time and Materials to hook up phone lines	85.00	<input type="checkbox"/>
10/10/07	Friends of the Library % Midge Gaylor 101 N. Chestnut Dr Mason City, Iowa 50401		Mailing vote, printing 1 yes postage	53.92	<input type="checkbox"/>
10/10/07	ACE Hardware 440 South Illinois Mason City, Iowa 50401		Portable sign 1/2 value of sign	50.00	<input type="checkbox"/>
10/10/07	Kathy Van Dike 6 College Circle Mason City Iowa 50401		Foam boards, Stencils, letters adhesive paint for signs	78.35	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (If last page of this schedule) \$ 1507.27

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 1 of 1  
(for Schedule E)